

08/31/01
JC960 U.S. PTO

BAKER BOTTS LLP

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C9-C4

JC971 U.S. PTO

09/944497

08/31/01

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. A34628 066123.0109	
	First Inventor Wani et al.	
	Title A	* see attached
	Express Mail Label No. EL866934597US	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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See MPEP chapter 600 concerning utility patent application contents.

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 29] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description <p><input checked="" type="checkbox"/> Claim(s) [Total Sheets 5]</p> <p><input checked="" type="checkbox"/> Abstract of the Disclosure [Total Sheets 1]</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]</p> <p>5. Oath or Declaration [Total Pages]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>
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ACCOMPANYING APPLICATION PARTS	
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 5:03) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p>	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

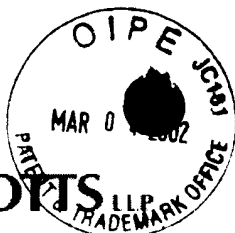
Prior application information: Examiner _____ Group: Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		21003 <i>(Insert Customer No. or Attach bar code label here)</i>		<input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		Zip Code	
Country		Telephone		Fax	

Name (Print/Type) Rochelle K. Seide	Registration No. (Attorney/Agent) 32,300
Signature	Date 08/31/2001

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Please type a plus sign (+) inside this box → ☐

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/944,497
Filing Date	8/31/01
First Named Inventor	Wani
Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known
Attorney Docket Number	A34628; 066123.0109

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

- | | | | | | | |
|---|--|--|---------|-------------------------------------|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment / Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input checked="" type="checkbox"/> Response to Missing Parts/
Incomplete Application
<input checked="" type="checkbox"/> Response to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers
(for an Application)
<input checked="" type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence
Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication
to Group
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input type="checkbox"/> Other Enclosure(s) (please
identify below): | | | | |
| <table border="1"><tr><td>Remarks</td><td><input checked="" type="checkbox"/></td></tr><tr><td colspan="2">Drawings required proper formatting of margins.</td></tr></table> | | | Remarks | <input checked="" type="checkbox"/> | Drawings required proper formatting of margins. | |
| Remarks | <input checked="" type="checkbox"/> | | | | | |
| Drawings required proper formatting of margins. | | | | | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112		
Signature		Att Name:	Rochelle K. Seide, Ph.D.
		PTO Reg:	32,300
Date	February 21, 2002		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: February 21, 2002

Typed or printed name	Rochelle K. Seide, Ph.D.		
Signature		Date	February 21, 2002

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$ 1,300

Complete if Known

Application Number	
Filing Date	August 31, 2001
First Named Inventor	Wani et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	A34628 066123.0109

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit Account Number **02-4377**
Deposit Account Name **Baker Botts LLP**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
710	355	Utility filing fee	710
320	160	Design filing fee	
490	245	Plant filing fee	
710	355	Reissue filing fee	
150	75	Provisional filing fee	

SUBTOTAL (1) (\$ 710

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
35	20** = 15	18	270
Independent Claims	7 - 3** = 4	80	320
Multiple Dependent			

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
80	40	Independent claims in excess of 3
270	135	Multiple dependent claim, if not paid
80	40	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 590

**for number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provision of filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for ex parte reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,240	620	Petition to revive - unintentional	
1,240	620	Utility issue fee for reissue	
440	220	Design issue fee	
600	300	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
710	355	For each additional invention to be examined (37 CFR § 1.129(b))	
710	355	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0

SUBMITTED BY

Name (Print Type)	Rochelle K. Seide	Registration No. (Attorney/Agent)	32,300	Telephone	(212) 408-2626
Signature		Date	08/31/2001		

Complete (if applicable)

BAKER BOTTS LLP

Addendum Sheet 1

Att Docket #: A34628 066123.0109

*Question 4 Addendum

4.a. Drawings are ☐ formal ☒ informal

* Question 5 Addendum

5.c. ☐ An unsigned oath or declaration is included.

* Question 8 Addendum

8.d. ☐ A sequence submission will follow.

* Question 9 Addendum

9.a. ☐ Assignment documents will follow.

9.b. ☐ Assignment documents have been filed in
parent application No.

* Question 11 Addendum

11.a. ☐ English translation will follow.

* Question 12 Addendum

12.a. ☐ Copies of IDS citations will follow.

* Question 15 Addendum

15.a. ☐ Certified copies of priority documents will follow.

15.b. ☐ Certified copies of priority documents have been filed in parent
application No.

Use the space below for additional information

THIS IS A NON-PROVISIONAL APPLICATION

BOTH A COLOR AND BLACK & WHITE COPY OF FIGURE 1 ARE ENCLOSED

Title (continued):

A PHARMACEUTICAL COMPOSITION USEFUL FOR INHIBITION OF OSTEOCLAST
FORMATION AND A PROCESS FOR THE EXTRACTION OF MUSSEL HYDROLYSATE
FROM INDIAN GREEN MUSSEL